



February 24, 2008

Bill targets stroke and heart attack care

BYLINE: ALAN BAVLEY, The Kansas City Star

Ambulances already bypass less-prepared hospitals to take severely injured patients to specially staffed and equipped trauma centers.

Under a proposal in the Missouri General Assembly, similar rules would apply to the way certain heart attack and stroke patients would be routed to hospitals. Ambulances would skip some facilities and go directly to the best-prepared hospitals.

The goal of the legislation is to avoid transferring patients when every minute can be critical to a patient's survival.

Heart attack and stroke are among the leading causes of death in the state.

"This is exciting legislation," said Jason White, government relations director for the Metropolitan Ambulance Services Trust in Kansas City. "It will help emergency medical services and hospitals create a system that will help save lives."

MAST and other Kansas City area rescue services are working on a similar plan to direct ambulances on both sides of the state line to hospitals best prepared to treat certain types of heart attacks.

Passage of the state bill, which is sponsored by Rep. Wayne Cooper, a Camdenton Republican and a physician, is a priority for the Missouri Department of Health and Senior Services this legislative session, said J. William Jermyn, medical director for the department's Emergency Medical Services unit.

Jermyn is leading a task force of doctors, hospital administrators and paramedics that is working out details of how such heart attack and stroke centers would operate.

The task force is expected to complete its report this spring. But any plan it develops would still need the legislation to give it the force of law, Jermyn said.

The bill already has garnered support from statewide organizations of rescue workers.

“Anything that we can provide that is effective for the survival of the patient and a better quality of life, we’re better for having done so,” said Nathan Williams, president of the Missouri Emergency Medical Services Association.

The Missouri Hospital Association has not taken a position. The issue is sensitive to hospitals that may be bypassed.

But the hospital association is working with the bill’s supporters to come up with acceptable language, association spokesman Dave Dillon said.

Work still needs to be done on how best to identify appropriate hospitals for heart attacks and strokes, Dillon said.

The legislation would affect heart attack patients who require urgent balloon angioplasty procedures.

The kind of heart attack receiving this priority attention is called an ST-segment elevation myocardial infarction, or STEMI. Basically, that’s a heart attack with a completely clogged heart artery in which one of the lines on the electrocardiogram is abnormally elevated. About 10 percent of heart attacks are STEMIs.

STEMI heart attacks can be treated with clot-busting drugs. But such drugs work only about half the time.

Angioplasty is effective in 90 percent or more of STEMI cases. But hospitals must be able to mobilize staff and resources quickly because the risk of death rises the longer it takes to start angioplasty.

Time also is critical for stroke patients.

Clot-busting drugs are used to treat strokes caused by clogged arteries that block blood flow to the brain.

But treating hospitals must be able to perform emergency brain scans to first diagnose the stroke, because giving clot-busting drugs to some stroke patients can worsen their condition.